NEW MEXICO
ENVIRONMENT DEPARTMENT

SUSANA MARTINEZ
Governor
JOHN A. SANCHEZ
Lieutenant Governor

Harold Runnels Building
1190 South St. Francis Drive (87505)
P.O. Box 5469, Santa Fe, NM 87502-5469
Phone (505) 827-0187 Fax (505) 827-0160
www.env.nm.gov

RYAN FLYNN
Cabinet Secretary
BUTCH TONGATE
Deputy Secretary

Certified Mail – Return Receipt Requested

January 21, 2016

Mr. Robert Cain, Board Chairman
Ramah Water and Sanitation District
P.O. Box 416
Ramah, NM 87321

Re: Ramah Water and Sanitation District, Minor Municipal, SIC 4952, NPDES Compliance Evaluation Inspection, NM0023396, December 21, 2015

Dear Mr. Cain:

Enclosed please find a copy of the report and check list for the referenced inspection that the New Mexico Environment Department (NMED) conducted at your facility on behalf of the U.S. Environmental Protection Agency (USEPA). This inspection report will be sent to the USEPA in Dallas for their review. These inspections are used by USEPA to determine compliance with the National Pollutant Discharge Elimination System (NPDES) permitting program in accordance with requirements of the federal Clean Water Act.

Introduction, treatment scheme, and problems noted during this inspection are discussed in the "Further Explanations" section of the inspection report.

You are encouraged to review the inspection report, required to correct any problems noted during the inspection, and advised to modify your operational and/or administrative procedures, as appropriate. If you have comments on or concerns with the basis for the findings in the NMED inspection report, please contact us (see the address below) in writing within 30 days from the date of this letter. Further, you are encouraged to notify in writing both the USEPA and NMED regarding modifications and compliance schedules at the addresses below:

Racquel Douglas
US Environmental Protection Agency, Region VI
Enforcement Branch (6EN-WM)
Fountain Place
1445 Ross Avenue
Dallas, Texas 75202-2733

Bruce Yurdin
New Mexico Environment Department
Surface Water Quality Bureau
Point Source Regulation Section
P.O. Box 5469
Santa Fe, New Mexico 87502

If you have any questions about this inspection report, please contact Erin Trujillo at 505-827-0418 or at erin.trujillo@state.nm.us.

Sincerely,

/s/Bruce J. Yurdin

Bruce J. Yurdin
Program Manager
Point Source Regulation Section
Surface Water Quality Bureau

cc: Rashida Bowlin, USEPA (6EN-AS) by e-mail
Carol Peters-Wagnon, USEPA (6EN-WM) by e-mail
Racquel Douglas, USEPA (6EN-WM) by e-mail
Gladys Gooden-Jackson, USEPA (6EN-WC) e-mail
Bill Chavez, NMED District I by e-mail
Brent Larsen & Tung Nguyen, USEPA (6WQ-PP) by e-mail
Isaac Chen, USEPA (6WQ-PP) by e-mail
Damon McElroy, USEPA (CAED) by e-mail
Althea Pat, Ramah Water and Sanitation District by e-mail (rwsdapat@outlook.com)
NMED SWQB Utility Operators Certification Program by e-mail

EPA

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

NPDES Compliance Inspection Report

Section A: National Data System Coding

1	Transaction Code	2	NPDES	11	yr/mo/day	17	Inspec. Type	18	Inspector	19	Fac Type	20
	N	5	NM0002339		151221		C		S		1	

Remarks: MINOR MUNICIPAL

67	Inspection Work Days	69	70	Facility Evaluation Rating	71	BI	72	QA	73	Reserved	74	75	Reserved	80
			1			N		N						

Section B: Facility Data

Name and Location of Facility Inspected *(For industrial users discharging to POTW, also include POTW name and NPDES permit number)*
Ramah Water and Sanitation District, 47-A N. Bloomfield Avenue, Ramah, NM. From I-40, take Exit 81 to NM-53 W, travel south then west approximately 55 miles to Ramah, travel south on Bloomfield Avenue approximately 0.2 miles to gated entrance. Plant is approximately 0.35 miles west of Bloomfield Avenue. McKinley County.

Entry Time /Date: ~1250 hours /12/21/2015

Permit Effective Date: October 1, 2015

Exit Time/Date: ~1530 hours / 12/21/2015

Permit Expiration Date: September 30, 2020

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)
-Ms. Althea Pat, WTP/WWTP Office/Accountant, Ramah Water & Sanitation District, 505-783-4018
-Mr. Flint Tietjin, Waste Water Level I Operator, Ramah Water & Sanitation District, 505-495-9577
-Ms. Dorothy Schonley, Vice Chair, Ramah Water & Sanitation District

Other Facility Data
Outfall
Latitude: 35.129444°
Longitude: -108.501944°

SIC 4952

Name, Address of Responsible Official/Title/Phone and Fax Number
Mr. Robert Cain, Board Chairman, P.O. Box 416, Ramah, NM 87321 / 505-783-4018, Fax 505-783-4288

Contacted: Yes [ ] No [*]

Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

M	Permit	U	Flow Measurement	U	Operations & Maintenance	N	CSO/SSO
U	Records/Reports	U	Self-Monitoring Program	U	Sludge Handling/Disposal	N	Pollution Prevention
M	Facility Site Review	N	Compliance Schedules	N	Pretreatment	N	Multimedia
U	Effluent/Receiving Waters	U	Laboratory	N	Storm Water	N	Other:

Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

1. See attached report and further explanations.

Name(s) and Signature(s) of Inspector(s)	Agency/Office/Telephone/Fax	Date
Erin S. Trujillo */s/Erin S. Trujillo*	**NMED/SWQB/505-827-0418**	**01/21/2016**
Signature of Management QA Reviewer	**Agency/Office/Phone and Fax Numbers**	**Date**
Sarah Holcomb */s/Sarah Holcomb*	**NMED/SWQB/505-827-2798**	**01/21/2016**

Ramah Water and Sanitation District-WWTP-12/21/2015	PERMIT NO. **NM0023396**

SECTION A - PERMIT VERIFICATION

PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS ☐ S ☒ M ☐ U ☐ NA (*FURTHER EXPLANATION ATTACHED* ***Yes***)
DETAILS: **Minor correction on permit and in databases needed for outfall location.**

1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE.	☒ Y ☐ N ☐ NA
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES.	☐ Y ☐ N ☒ NA
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT. **See details above**	☐ Y ☒ N ☐ NA
4. ALL DISCHARGES ARE PERMITTED.	☒ Y ☐ N ☐ NA

SECTION B - RECORDKEEPING AND REPORTING EVALUATION

RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT. ☐ S ☐ M ☒ U ☐ NA (*FURTHER EXPLANATION ATTACHED* ***Yes***)
DETAILS: **NetDMR subscriber agreement was approved May 3, 2011. Current staff did not have active access in NetDMR. No DMRs submitted, accepted or entered after April 2013. Permittee did not provide paper DMR records after September 2014. Deadline for submitting 10/2015 thru 12/2015 DMRs under 2015 Permit is January 28, 2015.**

1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRs. **N = See details above**	☐ Y ☒ N ☐ NA
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE.	☐ S ☐ M ☒ U ☐ NA
a) DATES, TIME(S) AND LOCATION(S) OF SAMPLING.	☒ Y ☐ N ☐ NA
b) NAME OF INDIVIDUAL PERFORMING SAMPLING	☒ Y ☐ N ☐ NA
c) ANALYTICAL METHODS AND TECHNIQUES.	☐ Y ☒ N ☐ NA
d) RESULTS OF ANALYSES AND CALIBRATIONS. **Y = Results of Analyses; N = Results of Calibrations**	☐ Y ☒ N ☐ NA
e) DATES AND TIMES OF ANALYSES. **Did not include both times for pH and TRC to verify holding times**.	☐ Y ☒ N ☐ NA
f) NAME OF PERSON(S) PERFORMING ANALYSES.	☒ Y ☐ N ☐ NA
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE.	☐ S ☐ M ☒ U ☐ NA
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR.	☐ S ☐ M ☒ U ☐ NA
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA. **2008 Permit**	☒ Y ☐ N ☐ NA

SECTION C - OPERATIONS AND MAINTENANCE

TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED. ☐ S ☐ M ☒ U ☐ NA *(FURTHER EXPLANATION ATTACHED* ***Yes***)
DETAILS:**Floating solids. Algal growth. Sludge in disinfection basin. Permittee WWTP Operator indicated DO meter needed.**

1. TREATMENT UNITS PROPERLY OPERATED. **Chlorination and/or de-chlorination basins**	☐ S ☐ M ☒ U ☐ NA
2. TREATMENT UNITS PROPERLY MAINTAINED. **See details above**	☐ S ☒ M ☐ U ☐ NA
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED. **Diesel generator**	☒ S ☐ M ☐ U ☐ NA
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE.	☐ S ☐ M ☒ U ☐ NA
5. ALL NEEDED TREATMENT UNITS IN SERVICE. **Nitrogen removal**	☐ S ☒ M ☐ U ☐ NA
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED.	☐ S ☐ M ☒ U ☐ NA
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED.	☒ S ☐ M ☐ U ☐ NA
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE. **Manuals need updated according to Permittee WWTP Operator**	☐ Y ☒ N ☐ NA
STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED.	☐ Y ☒ N ☐ NA
PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED.	☐ Y ☒ N ☐ NA

Ramah Water and Sanitation District-WWTP-12/21/2015	PERMIT NO. **NM0023396**

SECTION C - OPERATIONS AND MAINTENANCE (CONT'D)

9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR? ☐ Y ☒ N ☐ NA
IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED? ☐ Y ☐ N ☒ NA
HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS? ☐ Y ☐ N ☒ NA

10.HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT? ☐ Y ☒ N ☐ NA
IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT? ☐ Y ☐ N ☒ NA

SECTION D - SELF-MONITORING

PERMITTEE SELF-MONITORING MEETS PERMIT REQUIREMENTS. ☐ S ☐ M ☒ U ☐ NA *(FURTHER EXPLANATION ATTACHED **Yes**).*
DETAILS: **2015 & 2008 Permit require 24-hr flow proportioned composite for WET monitoring. WET monitoring has not occurred for 2015 Permit.**

1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT. ☒ Y ☐ N ☐ NA

2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES. ☒ Y ☐ N ☐ NA

3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT. **N = 2008 Permit. See details above** ☐ Y ☒ N ☐ NA

4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT. **BOD and TSS Influent TDS Drinking Water Intake** ☐ Y ☒ N ☐ NA

5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT. **2008 Permit TRC** ☐ Y ☒ N ☐ NA

6. SAMPLE COLLECTION PROCEDURES ADEQUATE. ☐ Y ☒ N ☐ NA

a) SAMPLES REFRIGERATED DURING COMPOSITING. **2015 Permit WET** ☐ Y ☐ N ☒ NA

b) PROPER PRESERVATION TECHNIQUES USED. ☒ Y ☐ N ☐ NA

c) CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136.3. **Both 2008 and 2015 Permit pH & TRC** ☐ Y ☒ N ☐ NA

7. IF MONITORING AND ANALYSES ARE PERFORMED MORE OFTEN THAN REQUIRED BY PERMIT, ARE THE RESULTS REPORTED IN PERMITTEE'S SELF-MONITORING REPORT? **DMRs not submitted** ☐ Y ☒ N ☐ NA

SECTION E - FLOW MEASUREMENT

PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS. ☐ S ☐ M ☒ U ☐ NA *(FURTHER EXPLANATION ATTACHED **Yes**)*
DETAILS: **2015 Permit requires flow measurement "instantaneous grab" once/day. 2008 Permit required "instantaneous" once/week. Flow measurement subject to accuracy requirements in Part III.C.6 of the permits.**

1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED. ☐ Y ☒ N ☐ NA
TYPE OF DEVICE **V-Notched Weir w/non-contact ultrasonic measurement system and recorder**

2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED. ☒ Y ☐ N ☐ NA

3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED. ☒ Y ☐ N ☐ NA

4. CALIBRATION FREQUENCY ADEQUATE. **Not documented** ☐ Y ☒ N ☐ NA
RECORDS MAINTAINED OF CALIBRATION PROCEDURES. **Not documented** ☐ Y ☒ N ☐ NA
CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE. **Documents not provided** ☐ Y ☒ N ☐ NA

5. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE. ☒ Y ☐ N ☐ NA

6. HEAD MEASURED AT PROPER LOCATION. **Not documented** ☐ Y ☒ N ☐ NA

7. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES. ☒ Y ☐ N ☐ NA

SECTION F – LABORATORY

PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS. ☐ S ☒ M ☐ U ☐ NA *(FURTHER EXPLANATION ATTACHED **Yes**)*
DETAILS: **Contract laboratory not inspected. TRC and pH are to be analyzed within 15 minutes of collection.**

1. EPA APPROVED ANALYTICAL PROCEDURES USED *(40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES).* **pH and TRC** ☐ Y ☒ N ☐ NA

Ramah Water and Sanitation District-WWTP-12/21/2015	PERMIT NO. **NM0023396**

SECTION F - LABORATORY (CONT'D)

2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED. ☐ Y ☐ N ☒ NA

3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT. **Not documented** ☐ S ☐ M ☒ U ☐ NA

4. QUALITY CONTROL PROCEDURES ADEQUATE. **See Further Explanations** ☐ S ☐ M ☒ U ☐ NA

5. DUPLICATE SAMPLES ARE ANALYZED. **0** % OF THE TIME. **See Further Explanations** ☐ Y ☒ N ☐ NA

6. SPIKED SAMPLES ARE ANALYZED. **pH = Not documented / Contract Laboratory 100** % OF THE TIME. ☐ Y ☒ N ☐ NA

7. COMMERCIAL LABORATORY USED. **But, Whole Effluent Toxicity (WET) laboratory not contracted.** ☒ Y ☐ N ☐ NA

LAB NAME **Hall Environmental Analysis Laboratory**
LAB ADDRESS **4901 Hawkins, NE, Albuquerque, NM 87109, 505-345-3975**
PARAMETERS PERFORMED **BOD, TSS, TSD, E.coli bacteria**

SECTION G - EFFLUENT/RECEIVING WATERS OBSERVATIONS. ☐ S ☐ M ☒ U ☐ NA *(FURTHER EXPLANATION ATTACHED **Yes**).*

OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOAT SOL.	COLOR	OTHER
Outfall 001	**Not Observed**	**Not Observed**	**Not Observed**	**Not Observed**	**Not Observed**	**Not Observed**	**NA**

RECEIVING WATER OBSERVATIONS **Exceedance of permit limits recorded. Flow entering ditch was not observed due to cattail vegetation and fence. Flow exiting weir to the outfall appeared clear. TRC and E.coli permit limit exceedances recorded.**

SECTION H - SLUDGE DISPOSAL

SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS. ☐ S ☐ M ☒ U ☐ NA *(FURTHER EXPLANATION ATTACHED **Yes**).*
DETAILS:

1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY. ☐ S ☒ M ☐ U ☐ NA

2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503. ☐ S ☐ M ☒ U ☐ NA

3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: **Past application not documented** (e.g., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE)

SECTION I - SAMPLING INSPECTION PROCEDURES *(FURTHER EXPLANATION ATTACHED **No**).*

1. SAMPLES OBTAINED THIS INSPECTION. ☐ Y ☐ N ☒ NA

2. TYPE OF SAMPLE OBTAINED

GRAB _____ COMPOSITE SAMPLE ___ METHOD _____ FREQUENCY

3. SAMPLES PRESERVED. ☐ Y ☐ N ☒ NA

4. FLOW PROPORTIONED SAMPLES OBTAINED. ☐ Y ☐ N ☒ NA

5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE. ☐ Y ☐ N ☒ NA

6. SAMPLE REPRESENTATIVE OF VOLUME AND MATURE OF DISCHARGE. ☐ Y ☐ N ☒ NA

7. SAMPLE SPLIT WITH PERMITTEE. ☐ Y ☐ N ☒ NA

8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED. ☐ Y ☐ N ☒ NA

9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT. ☐ Y ☐ N ☒ NA

Ramah Water and Sanitation District WWTP
Compliance Evaluation Inspection
NPDES Permit No. NM0023396
December 21, 2015

Further Explanations

Introduction

On December 21, 2015, Erin S. Trujillo of the New Mexico Environment Department (NMED), Surface Water Quality Bureau (SWQB) conducted a Compliance Evaluation Inspection (CEI) at the Ramah Wastewater Treatment (WWTP), a domestic waste water package plant that is owned and operated by the Ramah Water and Sanitation District (RW&SD) at 47-A N. Bloomfield Avenue, Ramah, New Mexico in McKinley County.

RW&SD WWTP has a recorded design flow capacity of 0.058 MGD (million gallons per day) and is classified as a minor discharger under the Federal Clean Water Act, Section 402, of the National Pollutant Discharge Elimination System (NPDES) permit program. It is assigned NPDES permit number NM0023396. This permit regulates the WWTP discharge to Togeye Drain, thence approximately 0.5 miles to Cebolla Creek, thence approximately 3.5 miles to the Rio Pescado, thence to the Zuni River, thence to the Little Colorado River in the Colorado River Basin. RW&SD WWTP has an expired permit DP-1235 with the State of New Mexico Groundwater Quality Bureau (GWQB).

Cebolla Creek from Zuni Pueblo to Ramah Reservoir is subject to Segment 20.6.4.98 New Mexico Administrative Code (NMAC) according to the State of New Mexico Standards for Interstate and Intrastate Surface Waters in 20.6.4 NMAC and has designated uses of livestock watering, wildlife habitat, primary contact and marginal warm water aquatic life. The assessment unit of Cebolla Creek has not been assessed and the referenced water quality standard citation is under review by NMED.

RW&SD representatives were contacted by this inspector, Ms. Trujillo, prior to this inspection to make arrangements for a district official to be available on the day of the CEI. Upon arrival at the District's office at 3367 Bond Street, Ramah, New Mexico 87321, 505-783-4018 at approximately 1250 hours on the day of the CEI, the inspector conducted an entrance interview with Ms. Althea Pat, RW&SD Office Manager/Accountant, Mr. Flint Tietjin, RW&SD WWTP Waste Water Level I Operator, and later Ms. Dorothy Schonley, RW&SD Vice Chair. Ms. Trujillo made introductions, presented credentials and explained the purpose of the inspection to the on-site Permittee representatives. The inspector and Mr. Tietjin traveled to and toured the WWTP package plant. Following the tour, an exit interview was conducted at the District's office with Ms. Pat, Mr. Tietjin and Ms. Schonley to present the preliminary findings of the inspection. The inspector left the facility at approximately 1530 hours on the day of the CEI.

NMED performs a certain number of CEIs for the U.S. Environmental Protection Agency (USEPA), Region VI, under the NPDES permit program, in accordance with the Federal Clean Water Act. USEPA uses these inspections to determine compliance with the NPDES permit program. This report is based on review of files maintained by the permittee and NMED, on-site observation by NMED personnel, and verbal information provided by the Permittee representatives. For this CEI Report, findings described in previous 2014 (conducted on August 5, 2014), 2012 (conducted on October 2, 2012) and 2011 (conducted on March 1, 2011) CEI Reports have been summarized. Table 1 below is a list of USEPA Region 6 NPDES enforcement orders and brief summary of major issues and compliance timeframes.

Table 1: Previous USEPA Compliance Orders

06/18/2015	CWA-06-2015-1781	Failure to re-apply timely. Failure to submit Discharge Monitoring Reports (DMRs). 60 day compliance
06/06/2013	CWA-06-2013-1814	Effluent violation, whole effluent toxicity (WET) monitoring and operation and maintenance (O&M) non-compliance. Stockpiled sludge to be removed. 30 day compliance
09/27/2011	CWA-06-2011-1774	Failure to properly operate plant. Failure to submit DMRs. 30 day compliance

During the CEI, Permittee representatives indicated the need for additional guidance on contacts, calculations and conversions necessary for reporting non-compliance and monitoring as required by the RW&SD's NPDES Permit. A list of USEPA compliance and enforcement staff and NMED contacts is provided in Appendix A. Appendix A also provides web links for more information on USEPA electronic reporting database NetDMR. If not discussed in findings below, additional USEPA guidance for calculations is provided in Appendix B.

Treatment Scheme

Ramah is an unincorporated community in McKinley County and has a recorded population in 2010 of 370 (population change since 2000: -9.1%). A population of 500 is recorded to be served by the public water supply in NMED drinking water system on-line records. The District's connections include approximately 120 residential homes; businesses including two restaurants, convenience store and automotive shop; church; and two schools. The elementary school, with an enrollment of 182, has a cafeteria, laundry facilities, and shower; and the middle/high school, with an enrollment of 191, has a cafeteria and shower facilities. Source of Ramah school enrollment data for the 2014-2015 School Year was available on-line at http://www.ped.state.nm.us/it/schoolfactsheets.html.

The extended aeration, activated sludge package plant was constructed in approximately 2000. The treatment train of the package plant is preceded by a small wet well lift station. The plant includes a bar screen, anoxic basin, aeration basin, secondary clarifier with two return activated sludge (RAS) lines, wasting tank-aerobic sludge digester, chlorine contact chamber, and de-chlorination unit. The Permittee WWTP Operator described that the plant's aeration is usually run continuously. Discharge flow is daily and mostly continuous. Reviewed records indicate the estimate flow from January 2013 to September 2014 ranged between 0.020 and 0.028 MGD (30-day average) and 0.021 and 0.037 MGD (7-day average).

Raw sewage in the collection system flows by gravity to the on-site lift station. Influent passes through the manual bar screen and enters an anoxic basin or chamber of the plant. Following the anoxic basin, a baffle directs wastewater through an opening into a narrow partition channel as a means to capture a portion of the floatable solids before they enter the aeration basin. Solids collected in this channel are pumped to the sludge digester portion of the plant. The sludge holding tank, anoxic tank, aeration tank, clarifier tank, chlorine contact tank, de-chlorination tablet feeder tube all have gravity flow.

From the aeration basin, wastewater enters the secondary clarifier then enters the chlorine chamber. After chlorination, the effluent enters the de-chlorination chamber and then flows through a v-notch weir to the outfall at Togeye Drain. Flow measurement ultrasonic meter equipment is mounted upstream of the V-notch weir.

Solids Management

The facility has three concrete sludge drying beds with underdrains to collect excess wastewater, which would have the ability to be pumped and return to the headworks.

Section A - Permit Verification - Overall rating of "Marginal"

Permit Requirements

Part I.A of the previous **2008 Permit** effective February 1, 2008 which was replaced October 1, 2015 stated:

Permit No. NM0023396 Page 1 of Part I

SECTION A. LIMITATIONS AND MONITORING REQUIREMENTS

Final Effluent limits - 0.058 mgd design flow.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from outfall 001. Such discharges shall be limited and monitored by the permittee as specified below:

EFFLUENT CHARACTERISTICS		DISCHARGE LIMITATIONS Standard Units		MONITORING REQUIREMENTS	
POLLUTANT	STORET CODE	MINIMUM	MAXIMUM	MEASUREMENT FREQUENCY	SAMPLE TYPE
PH	00400	6.0	9.0	Once/Month	Grab

EFFLUENT CHARACTERISTICS		DISCHARGE LIMITATIONS lbs/day, unless noted		mg/l, unless noted			MONITORING REQUIREMENTS	
POLLUTANT	STORET CODE	30-DAY AVG	7-DAY AVG	30-DAY AVG	7-DAY AVG	DAILY MAX	MEASUREMENT FREQUENCY	SAMPLE TYPE
Flow	50050	Report MGD	Report MGD	***	***	***	Twice/Week	Instantaneous
Biochemical Oxygen Demand, 5-day	00310	14.5	21.7	30	45	N/A	Once/Month	Grab
Total Suspended Solids	00530	14.5	21.7	30	45	N/A	Once/Month	Grab
E. coli Bacteria	51040	N/A	N/A	Report (*1)	N/A	Report (*1)	Once/Month	Grab
E. coli Bacteria	51040	N/A	N/A	548 (*1)	N/A	2507 (*1)	Once/Month	Grab
Total Residual Chlorine	50060	N/A	N/A	N/A	N/A	11 ug/l (*2)	Once/Month	Grab (*2)
Total Dissolved Solids	70296	Report	N/A	N/A	Report	N/A (*3)	Once/3-Months	Grab

EFFLUENT CHARACTERISTICS	DISCHARGE MONITORING		MONITORING REQUIREMENTS	
WHOLE EFFLUENT TOXICITY TESTING (48-Hour Static Renewal)	30-DAY AVG MINIMUM	48-HR MINIMUM	MEASUREMENT FREQUENCY	SAMPLE TYPE
Daphnia pulex	Report	Report	Once/First Year of Permit (*4, 5)	24-Hr Composite

There shall be no discharge of floating solids or visible foam in other than trace amounts.

Permit No. NM0023396 Page 2 of Part I

Sampling Location

Samples taken in compliance with the monitoring requirements specified above shall be taken at the discharge from the final treatment unit.

Footnotes

*1 Colony forming units (cfu) per 100 ml.

*2. The effluent limitation for TRC is the instantaneous maximum and cannot be averaged for reporting purposes. Instantaneous sample shall mean analyzed within 15-minutes of sample collection. (See Part II, Section A)

*3. TDS shall be reported as the difference between the drinking water intake TDS and the plant discharge TDS. For the purposes of reporting on the DMR, only report the difference between the drinking water and the plant effluent. Sample the drinking water once per calendar year, and for the four effluent samples in each calendar, report the difference between the two. The facility shall however keep a record of the actual drinking water and plant discharge TDS values onsite for inspection. This record shall be continuously maintained for three (3) years, and be made available for inspections by EPA and/or State inspectors

* 4. The sample for the first WET test for Outfall 001 shall be taken during the period November 1 and April 30 during the first year of the permit. The permittee shall submit the results of any toxicity testing performed in accordance with the Part II of the Permit. See Part II, Whole Effluent Toxicity Testing Requirements for additional WET monitoring and reporting conditions.

*5 This permit does not establish requirements to automatically increase the WET testing frequency after a test failure, or to begin a toxicity reduction evaluation (TRE) in the event of multiple test failures. However, upon failure of any WET test, the permittee must report the test results to EPA and NMED, Surface Water Quality Bureau, in writing, within 5 business days of notification of the test failure. EPA and NMED will review the test results and determine the appropriate action necessary, if any. (See Part II, Section E)

Changes and additions were made to the RW&SD's NPDES Permit in 2015. Part I.A (Limitations and Monitoring Requirements) of the **2015 Permit** effective October 1, 2015 states:

NPDES Permit No. NM0023396

SECTION A. LIMITATIONS AND MONITORING REQUIREMENTS

Final Effluent limits - 0.058 mgd design flow.

During the period beginning on the effective date of this permit and lasting through the expiration date of this permit, the permittee is authorized to discharge from outfall 001. Such discharges shall be limited and monitored by the permittee as specified below:

EFFLUENT CHARACTERISTICS		DISCHARGE LIMITATIONS Standard Units		MONITORING REQUIREMENTS	
POLLUTANT	STORET CODE	MINIMUM	MAXIMUM	MEASUREMENT FREQUENCY	SAMPLE TYPE
PH	00400	6.6	9.0	Five/Week	Grab

EFFLUENT CHARACTERISTICS	DISCHARGE LIMITATIONS					MONITORING REQUIREMENTS	
	lbs/day, unless noted		mg/l, unless noted				
POLLUTANT	30-DAY AVG	7-DAY AVG	30-DAY AVG	7-DAY AVG	DAILY MAX	MEASUREMENT FREQUENCY	SAMPLE TYPE
Flow	Report MGD	Report MGD	***	***	***	Once/Day	Instantaneous Grab
Biochemical Oxygen Demand, 5-day (BOD)	14.5	21.7	30	45	N/A	Once/Month	Grab
Total Suspended Solids (TSS)	14.5	21.7	30	45	N/A	Once/Month	Grab
BOD % Removal (*1)	85 %	N/A	N/A	N/A	N/A	Once/Month	Calculation
TSS % Removal (*1)	85 %	N/A	N/A	N/A	N/A	Once/Month	Calculation
E. coli Bacteria (*2)	N/A	N/A	206 (*2)	N/A	940 (*2)	Once/Month	Grab
Total Residual Chlorine	N/A	N/A	N/A	N/A	11 ug/l (*3)	Five/Week	Grab (*3)
Total Dissolved Solids, Water Intake	Report	N/A	Report (*4)	N/A	Report	Once/Year	Grab
Total Dissolved Solids, Effluent	Report	N/A	Report (*5)	N/A	Report	Once/3-Months	Grab
Total Dissolved Solids, Net	Report	N/A	400 (*6)	N/A	Report	Once/3-Months	Calculation (*6)

EFFLUENT CHARACTERISTICS	DISCHARGE MONITORING		MONITORING REQUIREMENTS	
WHOLE EFFLUENT TOXICITY TESTING (7-Dat Static Renewal)	30-DAY AVG MINIMUM	7-DAY MINIMUM	MEASUREMENT FREQUENCY	SAMPLE TYPE
Pimephales promelas	Report	Report	Once/First Year of Permit (*7, *8)	24-Hr Composite
Ceriodaphania dubia	Report	Report	Once/First Year of Permit (*7, *8)	24-Hr Composite

Sampling Location

Samples taken in compliance with the monitoring requirements specified above shall be taken at the discharge from the final treatment unit prior to mixing with receiving stream water.

Footnotes

*1. % Removal = (30-Day Ave Influent Conc. – 30-Dat Ave Effluent Conc.) ÷ 30-Day Ave Influent Conc.

*2. Colony forming units (cfu) per 100 ml or count per 100 ml.

*3. The effluent limitation for TRC is the instantaneous maximum and cannot be averaged for reporting purposes. Instantaneous sample shall mean analyzed within 15-minutes of sample collection.

*4. Report total dissolved solids (TDS) at the intake water to the drinking water plant.

*5. Report TDS at the effluent.

*6. Net TDS shall be reported as the difference between the drinking water intake TDS and the plant discharge TDS. For the purposes of reporting on the DMR, geometric mean may be reported if more than one samples are taken during the reporting period. The facility shall keep a record of the actual drinking water intake TDS values and plant discharge TDS values onsite for inspection. This record shall be continuously maintained for three (3) years, and be made available for inspections by EPA and/or State inspectors

*7. The sample for the first WET test for Outfall 001 shall be taken during the period November 1 and April 30 during the first year of the permit. The permittee shall submit the results of any toxicity testing performed in accordance with the Part II of the Permit. See Part II, Whole Effluent Toxicity Testing Requirements for additional WET monitoring and reporting conditions.

*8. This permit does not establish requirements to automatically increase the WET testing frequency after a test failure, or to begin a toxicity reduction evaluation (TRE) in the event of multiple test failures. However, upon failure of any WET test, the permittee must report the test results to EPA and NMED, Surface Water Quality Bureau, in writing, within 5 business days of notification of the test failure. EPA and NMED will review the test results and determine the appropriate action necessary, if any. (See Part II, Section E)

Part I.A of the 2008 and 2015 Permits require the monitoring and reporting of the net difference between the annual drinking water intake Total Dissolved Solids (TDS) and the plant discharge TDS once per 3 months. Part I.A of the 2015 Permit requires annual reporting of water intake TDS. Part I.A of the 2015 Permit also requires a net TDS 30-day Avg limitation of 400 mg/L. Footnotes in the Permits changed as follows:

- Footnote 3 of the 2008 Permit stated:

> *3. TDS shall be reported as the difference between the drinking water intake TDS and the plant discharge TDS. For the purposes of reporting on the DMR, only report the difference between the drinking water and the plant effluent. Sample the drinking water once per calendar year, and for the four effluent samples in each calendar, report the difference between the two. The facility shall however keep a record of the actual drinking water and plant discharge TDS values onsite for inspection. This record shall be continuously maintained for three (3) years, and be made available for inspections by EPA and/or State inspectors

- Footnote 4 of Part I.A of the 2015 Permit states *"Report total dissolved solids (TDS) at the intake water to the drinking water plant."* Footnote 6 of the 2015 Permit states:

> *6. Net TDS shall be reported as the difference between the drinking water intake TDS and the plant discharge TDS. For the purposes of reporting on the DMR, geometric mean may be reported if more than one samples are taken during the reporting period. The facility shall keep a record of the actual drinking water intake TDS values and plant discharge TDS values onsite for inspection. This record shall be continuously maintained for three (3) years, and be made available for inspections by EPA and/or State inspectors

Part III.D.9 (Other Information) of the permit states *"Where the permittee becomes aware that it failed to submit any relevant facts in a permit application, or submitted incorrect information in a permit application or in any report to the Director, it shall promptly submit such facts or information."*

Findings for Permit Verification

- Outfall Location Needs Correction: The latitude location of the discharge point is as not as described on the Signature Authorization page of the permit. The following is a minor correction for the RW&SD outfall:

	Deg, Min, Seconds	Decimal Degrees
Authorized/Title Page of Permit	35° 7' 45.00" N, 108° 30' 7.00"W	
Actual Location	35° 7' 46.00" N, 108° 30' 7.00"W	35.129444°, -108.501944°

- TDS Monitoring and Calculation Clarification: Ramah does not have a drinking water plant as indicated in Footnote 4 of the 2015 Permit, but three individual wells. During the exit interview, Permittee representatives indicated that they did not know where to collect a sample to satisfy the water intake monitoring condition of the 2015 Permit.

  Additional Notes: Previous RW&SD operator records dated June 2013 indicate TDS control (drinking water intake) was 427 mg/L; however, day of sample collection, associated laboratory analytical report(s) or location of sample collection was not noted on provided records.

  Permittee representatives described that there was no central collection system or drinking water plant and that three (3) public water supply wells flow directly into the water distribution system at separate locations. For public water system requirements, each drinking water well is sampled separately. Also, water in the RW&SD storage tank may not be representative of the entire system.

  Permittee would need to contact the USEPA Region 6 Permit Writer to obtain clarification about the monitoring location(s) and any necessary calculations to represent the drinking water intake (see Appendix A for contact information).

- Percent Removal Clarification: The formula in Footnote #1 of Part I.A of the Permit effective October 1, 2015, has a typo and is incomplete. Footnote #1 states:

Footnotes

*1. % Removal = (30-Day Ave Influent Conc. – 30-Dat Ave Effluent Conc.) ÷ 30-Day Ave Influent Conc.

Using a similar format style as in the Permit, the following is a clarification:

**1. % Removal = [(30-Day Ave Influent Conc. – 30-Day Ave Effluent Conc.) ÷ (30-Day Ave Influent Conc.)] x 100*

Additional Notes: In USEPA Region 6's NPDES permit, 85% removal limitation (i.e., greater or equal (≥) to 85%) is shown in the loading column of the permit. In the 2015 Permit Footnote #1, concentration data is used to calculate Biochemical Oxygen Demand (BOD) % and Total Suspended Solids (TSS) % removal.

Section B - Recordkeeping and Reporting Evaluation - Overall rating of "Unsatisfactory"

Permit Requirements

Part II.B of the 2008 and 2015 Permits state:

24-HOUR ORAL REPORTING: DAILY MAXIMUM LIMITATION VIOLATIONS

Under the provisions of Part III.D.7.b.(3) of this permit, violations of daily maximum limitations for the following pollutants shall be reported orally to EPA Region 6, Compliance and Assurance Division, Water Enforcement Branch (6EN-W), Dallas, Texas, and concurrently to NMED within 24 hours from the time the permittee becomes aware of the violation followed by a written report in five days. The Pueblo of Zuni shall also be notified at P.O. BOX 339, Zuni, NM, 87327, telephone # 505-782-7000 due to its close proximity to the treatment facility.

TRC
E. coli bacteria

Part III, Section C.3, Retention of Records of the 2008 and 2015 Permits state:

The permittee shall retain records of all monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation, copies of all reports required by this permit, for a period of at least 3 years from the date of the sample, measurement, report or application. This period may be extended by request of the Director at any time.

Part III, Section D.4, Record Contents of the 2008 and 2015 Permit state:

Records of monitoring information shall include:
a. The date, exact place, and time of sampling or measurements;
b. The individual(s) who performed the sampling or measurements;
c. The date(s) and time(s) analyses were performed;
d. The individual(s) who performed the analyses;
e. The analytical techniques or methods used; and
f. The results of such analyses.

Part III, Section D.4, Discharge Monitoring Reports and Other Reports of the 2008 and 2015 Permits state:

Monitoring results must be reported on Discharge Monitoring Report (DMR) Form EPA Number 3320-1in accordance with the "General Instructions" provided on the form. The permittee shall submit the original DMR signed and certified as required by Part III.D.11 and all other reports required by Part III.D to the EPA at the address below. Duplicate copies of DMRs and all other reports shall be submitted to the appropriate State agency(ies)….

Findings for Recordkeeping and Reporting

- DMRs had still not been submitted to USEPA in accordance with the previous 2008 Permit conditions; as ordered by USEPA enforcement action letter dated June 18, 2015; and thru the administratively continued 2008 permit thru September 30, 2015.

  Failure to submit DMRs per the conditions of the permit is a repeat finding. Failure to submit DMRs was a finding of the 2011 CEI Report. Failure to submit DMRs since March of 2013 was discussed in the 2014 CEI Report. USEPA Enforcement Action CWA-06-2015-1781 dated June 18, 2015 states *"The order requires the submission of discharge monitoring data for the period since the permit expired on January 31, 2013 or to provide an explanation for why such data cannot be provided."*

  Additional Notes: Permittee's NetDMR subscriber agreement to submit DMRs electronically to USEPA was approved May 3, 2011. Permittee's office manager/accountant indicated that the RW&SD staff did not have current access to submit DMRs electronically.

  Permittee's office manager/accountant described contacting USEPA and e-mailing paper DMRs following receipt of the 2015 enforcement order. September 2014 was last DMR submitted to EPA according to the Permittee Representative. Documentation that the e-mailed DMRs were received and accepted by USEPA was not readily available during or provided following this CEI.

  Copies of paper DMRs records after January 2013 kept by the Permittee that were provided to this Inspector during this CEI are provided in Appendix C. Certification/signatures on the paper DMRs were not dated. No paper DMRs were provided for the time period between October 2014 thru September 2015. Permittee also does not have paper monthly, quarterly and yearly DMRs that would meet the requirements for reporting under the 2008 or 2015 Permits. For example, quarterly monitoring was included on monthly monitoring paper DMRs prepared under the 2008 Permit. Labels for 7-day averages were not on the paper DMRs prepared under the 2008 Permit. Permittee did not report have separate Whole Effluent Toxicity (WET) DMRs to report bio-monitoring results of samples collected in 2013.

  During the exit interview of this CEI, this Inspector recommended to on-site Permittee representatives that the RW&SD contact and respond in writing to USEPA regarding the status and their anticipated schedule of complying with the 2015 enforcement order. Part I.C of the 2015 Permit requires DMR reporting periods which start January 28, 2016. The Permittee can contact USEPA to report non-compliance under the 2015 Permit. See Appendix A for contacts.

- Permittee representatives had made an effort to compile available recordkeeping since the last CEI. Provided recordkeeping, including available paper DMRs as discussed above, was incomplete, for example:

  - Reviewed recordkeeping after September 2014 did not include loading calculations for BOD and TSS.

  - Flow measurement records, pH and total residual chlorine (TRC) monitoring bench sheets, analytical laboratory results, and/or calculations were missing for some months. Inconsistencies and record gaps are summarized further below in Table 2:

Table 2: Review of RW&SD Records under the 2008 Permit

FEB 2013	USEPA indicates that DMR was submitted. Associated kept records were not readily available or provided by Permittee.
MAR 2013	February 2013 BOD & TSS data appears to have recorded on March 2013 paper DMR. No TRC or pH monitoring data records provided.
APR 2013	No pH and TRC monitoring data records provided.
MAY 2013	Monitoring period and exceedances are incorrectly recorded on paper DMR.
JAN 2014	No records or paper DMR provided.

FEB 2014	Reason for recording of flow exceedances was not determined.
MAR 2014	Reason for recording of flow exceedances was not determined.
APR 2014	No laboratory analytical reports for BOD, TSS, TDS, or E.coli provided.
JUN 2014	Reason for recording of flow exceedances was not determined.
SEP 2014	No laboratory analytical report for BOD, TSS, E.coli or TDS provided.
FEB 2015	No flow records provided.
MAR 2015	No flow records provided.
APR 2015	No flow records provided.
MAY 2015	No flow records provided.
JUL 2015	No pH, TRC or flow records provided
AUG 2015	No pH, TRC or flow records provided
SEP 2015	No flow records provided.

- Permittee's 2014 renewal permit application was requested during the CEI, but the application was not readily available or provided during or following this CEI.

- NMED SWQB files do not have record of 24-hour oral reporting of daily maximum limitation violations required in Part II.B of the Permit for E.coli bacteria and TRC under the 2008 Permit and TRC under the 2015 Permit. Findings for effluent exceedances are further discussed in Section G of this report.

- Additional findings for recordkeeping are in Section C (Operation and Maintenance), Section E (Flow Measurement), Section F (Laboratory) and Section H (Sludge) of this report.

Section C - Operations and Maintenance - Overall rating of "Unsatisfactory"

Permit Requirements

Part III.B.3 (Proper Operation and Maintenance) of the 2008 and 2015 Permits state:

a. The permittee shall at all times properly operate and maintain all facilities and systems of treatment and control (and related appurtenances) which are installed or used by permittee as efficiently as possible and in a manner which will minimize upsets and discharges of excessive pollutants and will achieve compliance with the conditions of this permit. Proper operation and maintenance also includes adequate laboratory controls and appropriate quality assurance procedures. This provision requires the operation of backup or auxiliary facilities or similar systems which are installed by a permittee only when the operation is necessary to achieve compliance with the conditions of this permit.

b. The permittee shall provide an adequate operating staff which is duly qualified to carry out operation, maintenance and testing functions required to insure compliance with the conditions of this permit.

Part I.E (Pollution Prevention Requirements) of the 2008 and 2015 Permits state:

SECTION E. POLLUTION PREVENTION REQUIREMENTS

1. The permittee shall institute a program within 12 months of the effective date of the permit (or continue an existing one) directed towards optimizing the efficiency and extending the useful life of the facility. The permittee shall consider the following items in the program:

   A. The influent loadings, flow and design capacity;

   B. The effluent quality and plant performance;

   C. The age and expected life of the wastewater treatment facility's equipment;

   D. Bypasses and overflows of the tributary sewerage system and treatment works;

   E. New developments at the facility;

   F. Operator certification and training plans and status;

   G. The financial status of the facility;

   H. Preventative maintenance programs and equipment conditions and;

   I. An overall evaluation of conditions at the facility.

Findings for Operation and Maintenance

- Plant has an inadequate alarm system for power or equipment failures. Permittee WWTP Operator described that a security light at the plant was visible from his home and would go out if there was a power outage at the plant. Other than the security light, no other alarm system is provided at the plant for equipment failures. **This is a repeat finding** (2011 CEI Report).

- Generator/back up power is operated manually and does not automatically turn on if there is a power failure. **This is a repeat finding** (2011 and 2012 CEI Reports).

- Plant's design nitrogen removal was not maintained or operable as designed—"paddle" mixer was no longer installed. Anoxic basin aeration / mixer not functioning was a similar finding discussed in the 2011 and 2014 CEI Reports.

- Plant's sludge holding tank in the secondary clarifier had little freeboard remaining. A similar finding was discussed in the 2014 CEI Report. Plant's operator described that sludge accumulates in the disinfection basin. Additional findings for sludge management operation and maintenance are in Section H of this report.

- Plant's secondary clarifier had floating solids and algal growth on weirs that need to be skimmed, cleaned and removed. Maintenance had notably improved from the previous finding that the secondary clarifier was crusted over and bulking as described and shown in photos of the 2012 CEI Report.

- Plant's disinfection basin weirs had algal growth that needed to be cleaned and removed.

- Exceedances of permit limits for E.coli Bacteria and TRC may indicate that the operation of the disinfection and de-chlorination feeders need to be optimized. Effluent exceedances are discussed in Section G of this CEI Report.

- Operation and maintenance manuals were available, but needed to be updated according to the Permittee WWTP Operator.

- Standard operating procedures and schedules of equipment maintenance and repair were not established in written form.

- Procedures for emergency treatment control (e.g., spills, power outages, high effluent TRC, etc.) were not established in written form.

- An inadequate number of qualified operators has been provided by the Permittee to operate the plant. Also, during times of leave of the Permittee's operator, there would be no qualified backup operator. **Insufficient qualified operator(s) is a repeat finding** (2011 CEI Report).

  Additional Notes: Permittee's WWTP operator had recently obtained certification, but indicated that he did not have the sufficient level of certification required under the State of New Mexico Utility Operator Certification Program. More information for the Utility Operator Certification Program (UOCP) that administers Water and Wastewater Operators at all public water and wastewater utilities in New Mexico is available at https://www.env.nm.gov/swqb/UOCP/. State of New Mexico utility operator certification regulations are available on-line at http://164.64.110.239/nmac/parts/title20/20.007.0004.pdf.

Section D - Self-Monitoring - Overall rating of "Unsatisfactory"

Permit Requirements for Self-Monitoring:

Part III.C.5 of the 2008 and 2015 Permit state:

a. Monitoring must be conducted according to test procedures approved under 40 CFR Part 136, unless other test procedures have been specified in this permit or approved by the Regional Administrator.

b. The permittee shall calibrate and perform maintenance procedures on all monitoring and analytical instruments at intervals frequent enough to insure accuracy of measurements and shall maintain appropriate records of such activities.

c. An adequate analytical quality control program, including the analyses of sufficient standards, spikes and duplicate samples to insure the accuracy of all required analytical results shall be maintained by the permittee or designated commercial laboratory.

Findings for Self-Monitoring

- Sampling and analyses has not been completed for public water system intake TDS for more than 1 year in order to calculate net TDS once per 3 months as required in Part I.A of the 2008 and 2015 Permits based on provided records.

- Sampling and analyses had not been completed for influent BOD and TSS once per month in order that percent removal could be calculated per Part I.A of the 2015 Permit effective October 1, 2015. The samples must be collected over the same time period in order to accurately reflect the percent removal.

- Additional findings for pH and TRC recordkeeping and monitoring are in Section F (Laboratory) of this report.

Section E - Flow Measurement - Overall rating of "Unsatisfactory"

Permit Requirements

Part I.A of the 2008 Permit required "instantaneous" once/week and the 2015 Permit requires flow measurement "instantaneous grab" once/day.

Flow measurement is subject to accuracy requirements in Part III.C.6 of the permits that state:

> 6. FLOW MEASUREMENTS
> Appropriate flow measurement devices and methods consistent with accepted scientific practices shall be selected and used to ensure the accuracy and reliability of measurements of the volume of monitored discharges. The devices shall be installed, calibrated, and maintained to insure that the accuracy of the measurements is consistent with the accepted capability of that type of device. Devices selected shall be capable of measuring flows with a maximum deviation of less than 10% from true discharge rates throughout the range of expected discharge volumes.

Findings for Flow Measurements

- Under the 2008 Permit, various totalized readings in gallons throughout the month were used to estimate flow. Number of days in the month and time of day of readings varied. Therefore, the calculated flows were estimates. Reporting of estimated flow and loading calculations (e.g., lbs/day), or other monitoring data that does not meet the requirements of the permit would need to be noted comments of the DMRs or as otherwise directed by NetDMR staff. NetDMR has several "No Data Indicators (NODIs)" to indicate flagged or no data.

- No recent calibration of the weir, ultrasonic meter and recorder had been conducted. Flow measurement calibration check records to assure continued compliance as described by the Permittee's WWTP operator on the day of this CEI was requested, but the records were not provided following this CEI. **No flow calibration or periodic check records is a repeat finding** (2011 CEI Report).

Section F - Laboratory - Overall rating of "Unsatisfactory"

Permit Requirements for Laboratory

Part III.C.5.a of the 2008 and 2015 Permit states "*Monitoring must be conducted according to test procedures approved under 40 CFR 136, unless other test procedures have been specified in this permit or approved by the Regional Administrator.*"

Findings for Laboratory

- Reviewed sampling and analyses recordkeeping for pH and TRC did not include analytical methods and techniques; results of analyses and calibrations; and times of analyses. Both time of sample collection and analysis is needed to verify that the monitoring met holding times in 40 CFR 136.3 Table II.

- Permittee's contract laboratory did not provide method approval dates to verify that the use of USEPA approved analytical procedures in 40 CFR 136.3 were used.

  Additional Notes: The method used for E.coli bacteria analysis on the contract laboratory report dated November 17, 2015 was Standard Method 9223B. Approved methods in 40 CFR 136.3 Table IA for E.coli (see Federal Register, Vol. 77, No. 97, Friday, May 18, 2012, Rules and Regulations) include Standard Methods 9223B-2004. SM 22nd Edition contains the 9223B-2004 approved method.

- Quality control procedures were not adequate, for example:

  - Written sample collection and analytical procedures were not available.
  - Permittee did not have copies of pH and TRC approved methods for on-site monitoring of pH and TRC.

- Permittee WWTP Operator described that pH and TRC instruments were calibrated (buffer standards or spikes), but checks and equipment maintenance were not recorded.
- Duplicate samples were not submitted to contract laboratories as a check of sampling and analytical performance. According to EPA's NPDES Inspection Manual, *"10 percent of the samples should be duplicated."*

Comment

- Permittee had not contracted with a commercial laboratory to conduct WET analytical testing under the 2015 Permit. Footnote 7 of Part I.A of the 2015 Permit states "*The sample for the first WET test for Outfall 001 shall be taken during the period November 1 and April 30 during the first year of the permit."* A 24-hour composite sample is also required. Early coordination with a laboratory contracted to conduct WET testing is often needed to ensure that Permit conditions (e.g., sample volumes, containers, preservation, test species, etc.) are met. During this CEI, this inspector recommended to Permittee representatives that the RW&SD start making arrangements for WET monitoring in the timeframe window required by the Permit.

Section G - Effluent/Receiving Waters Observations - Overall rating of "Unsatisfactory"

Permit Requirements for Effluent/Receiving Waters

In Part II of the 2008 Permit, TRC minimum quantification level (MQL) was 100 micrograms per liter (µg/L), and TRC effluent monitoring results above 100 µg/L may not be reported as zero (0). In Part II of the 2015 Permit, the MQL for TRC was reduced to 33 µg/L. In both the 2008 and 2015 Permits, Part I.A, the TRC effluent limitation is 0.011 mg/L (11 µg/L).

In Part IA, E.coli bacteria daily max and 30-day Avg and limitations were 2507 and 548 cfu per 100 ml, respectively, in the 2008 Permit. E.coli bacteria daily max and 30-day Avg limitations were reduced to 940 and 206 cfu per 100 ml, respectively, in Part I.A of the 2015 Permit.

Findings for Effluent/Receiving Waters

- On September 23, 2015, an effluent TRC measurement of 0.34 mg/L (340 µg/L) was recorded, above the 2008 MQL and exceeded effluent limitations.

- TRC measurements above 0.033 mg/L (33 µg/L) were recorded, above the 2015 MQL and exceeded effluent limitations on 16 days in October 2015 (daily max of 950 µg/L was recorded on October 29); 23 days in November 2015 (daily max of 1,110 µg/L was recorded on November 19); and 4 days in December 2015 as of the day of this CEI.

- TSS and E.coli bacteria effluent exceedances have also occurred as summarized in Table 3 below.

- NMED SWQB files contain a July 23, 2013 RW&SD letter with WET laboratory analytical report and results of a composite sample collected January 30 and 31, 2013. Summary results state *"Outfall 001 passed for this testing period."* A copy of the RW&SD letter and report is provided in Appendix D. Provided copies of records did not include this report. Documentation that the Permittee had submitted the passing WET results on a DMR was not readily available during or provided following this CEI.

Table 3: Summary of Concentration Data from Provided Records

	pH	pH	BOD	BOD	TSS	TSS	E.coli	E.coli	TDS	TDS
	Min	Max	30-day Avg	7-day Avg	30-day Avg	7-day Avg	30-day Avg	Daily Max	30-day Avg	7 Day Avg
2008 Permit Limits	6.0	9.0	30	45	30	45	548	2507	Report	Report
Monitoring Frequency	1/mo	1/mo	1/mo	1/mo	1/mo	1/mo	1/mo	1/mo	1/3mo	1/3mo
Units	s.u.	s.u.	mg/L	mg/L	mg/L	mg/L	cfu/100 ml	cfu/100 ml	lbs/day	mg/L
JAN 2013	7.2	7.3	8.0	8.0	17.0	17.0	1046.2	1046.2	158	808
FEB	7.3	7.4	8.1	8.1	17.0	17.0	60.1	60.1		
MAR			12.0	12.0	21.0	21.0	770.1	770.1	152	913
APR			34.0	34.0	27.0	27.0	>2419.6	>2419.6		
MAY	7.2	7.5	8.3	8.3	10.0	10.0	>2419.6	>2419.6		
JUN	7.2	7.5	6.5	6.5	13.0	13.0	920.8	920.8	171	853
JUL	7.2	7.5	4.1	4.1	7.0	7.0	27.5	27.5		
AUG	7.3	7.4	4.6	4.6	15.0	15.0	>2419.6	2419.6		
SEP	7.3	7.4	4.2	4.2	4.0	4.0	12.1	12.1	178	823
OCT	7.34	7.76	3.0	3.0	18.0	18.0	25.9	25.9		
NOV	7.34	7.43	4.4	4.4	18.0	18.0	36.4	36.4		
DEC	7.35	7.4	6.5	6.5	26.0	26.0	>2419.6	>2419.6	124.9	713
JAN 2014										
FEB	7.33	749	18.0	18.0	50.0	50.0	1986.3	1986.3		
MAR	7.34	7.39	10.0	10.0	13.0	13.0	1732.9	1732.9	143	661
APR	7.51	7.6	6.6	6.6	5.0	5.0	517.0	517.0		
MAY	7.39	7.71	13	13	30	30	17.1	17.1		
JUN	7.54	7.65	15	15	36	36	613.1	613.1	108	721
JUL	7.51	7.71	4.4	4.4	6.0	6.0	160.7	160.7		
AUG	7.53	7.68	2.5	2.5	7.0	7.0	8.5	8.5		
SEP	7.73	7.81	5.2	5.2	11	11	206	206	121	661
OCT	7.44	7.8	3.3	3.3	8.0	8.0	26.9	26.9		
NOV			5.3	5.3	32.0	32.0	83.9	83.9		
DEC	7.25	7.51	2.0	2.0	<4.0	<4.0	7.4	7.4		
JAN 2015	7.34	7.54	3.0	3.0	<4.0	<4.0	8.6	8.6		
FEB	7.38	7.62	3.0	3.0	<4.0	<4.0	7.5	7.5		
MAR	7.42	7.78	2.6	2.6	9.0	9.0	4.1	4.1		
APR	7.2	7.59	5.7	5.7	<4.0	<4.0	3.1	3.1		
MAY	7.42	7.78	18.0	18.0	10.0	10.0	27.2	27.2		
JUN	7.36	7.62	3.4	3.4	<4.0	<4.0	5.2	5.2		
JUL			4.2	4.2	<4.0	<4.0	980.4	980.4		
AUG			4.3	4.3	<4.0	<4.0	770.1	770.1		
SEP	7.3	7.8	3.0	3.0	<4.0	<4.0	193.5	193.5		

Notes: Recorded exceedances are in red. E.coli bacteria results of >2419.6 cfu/100 ml were too high to count.

Section H – Sludge- Overall rating of "Unsatisfactory"

Permit Requirements for Sludge

Part IV, Element 1, Section 1.A.1, General Requirements states:

> *The permittee shall handle and dispose of sewage sludge in accordance with Section 405 of the Clean Water Act and all other applicable Federal Regulations to protect public health and the environment from any reasonably anticipated adverse effects due to any toxic pollutants which may be present in the sludge.*

In the Code of Federal Regulations at 40 CFR Part 503.9 (y): …*the placement of sewage sludge on land on which the sewage sludge remains for two years or less.* In the Code of Federal Regulations at 40 CFR Part 503.16 and 503.26, Management Practices - Table 1, Frequency of Monitoring states *Greater than zero, but less than 290 metric tons per 354 day period, frequency of monitoring shall be once per year.*

Findings for Sludge

- Records of sludge management, land application or disposal were requested during the CEI, but were not available or provided. Improper sludge removal may be a factor in effluent permit limitation exceedances (Summarized above in Table 3). **This is a repeat finding.**

- Sludge was stockpiled in the middle drying bed. The Permittee WWTP Operator indicated that the RW&SD would need to dispose of accumulated sludge at an approved landfill. Any sludge mixed with soil at entrances to the drying beds would also need to be properly disposed.

  Need for proper sludge management is a repeat finding. For example, a Sludge Reclamation Plan was a result from USEPA's compliance order CWA-06-2011-1774.

  Additional Sources of Information: USEPA's web site with information on biosolid regulations is available at http://www.epa.gov/biosolids. During the exit interview of this CEI, this Inspector recommended to Permitee representatives that the RW&SD contact solid waste disposal facilities to find out landfill disposal requirements. More information on solid waste and disposal requirements is available at NMED Solid Waste Bureau web site at https://www.env.nm.gov/swb/. A list of New Mexico landfills permitted to accept special waste or sludge (updated 8.20.15) is available at:

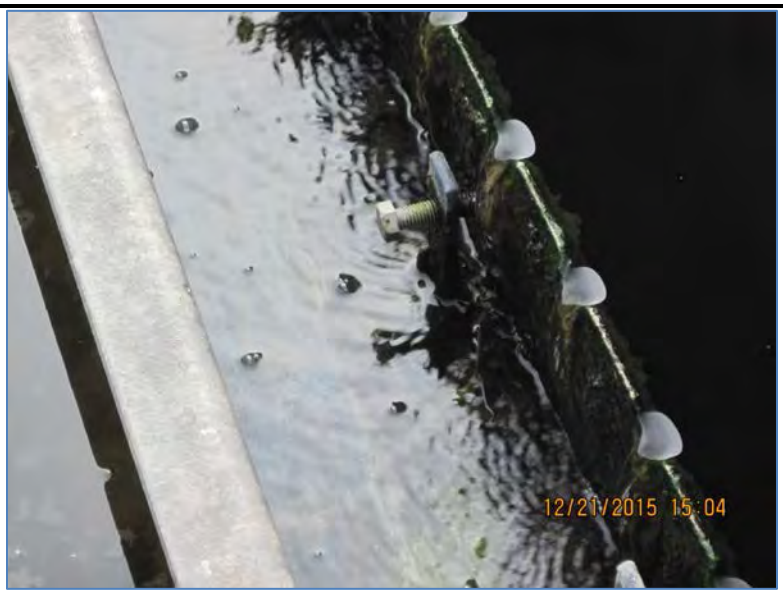
  https://www.env.nm.gov/swb/documents/8.20.15SpecialWasteLFCorrected.pdf.

NMED/SWQB Official Photograph Log Photo # 1		
Photographer: Erin S. Trujillo	Date: 12/21/2015	Time: 1358 hours *(camera had not been updated for time change)*
City/County: Ramah / McKinley County		State: New Mexico
Location: Ramah Water and Sanitation District (RW&SD), WWTP, NPDES Permit No. NM0023396		
Subject: Plant's aeration mixer was operating.		

NMED/SWQB Official Photograph Log Photo # 2		
Photographer: Erin S. Trujillo	Date: 12/21/2015	Time: 1359 hours *(camera had not been updated for time change)*
City/County: Ramah / McKinley County		State: New Mexico
Location: Ramah Water and Sanitation District (RW&SD), WWTP, NPDES Permit No. NM0023396		
Subject: Arrow points to accumulated sludge in secondary clarifier intake. Sludge was near the top of the containment with little free board remaining.		

NMED/SWQB Official Photograph Log Photo # 3		
Photographer: Erin S. Trujillo	Date: 12/21/2015	Time: 1400 hours *(camera had not been updated for time change)*
City/County: Ramah / McKinley County		State: New Mexico
Location: Ramah Water and Sanitation District (RW&SD), WWTP, NPDES Permit No. NM0023396		
Subject: Floating solids and algal growth on the exit weir of secondary clarifier was observed.		

NMED/SWQB Official Photograph Log Photo # 4		
Photographer: Erin S. Trujillo	Date: 12/21/2015	Time: 1404 hours *(camera had not been updated for time change)*
City/County: Ramah / McKinley County		State: New Mexico
Location: Ramah Water and Sanitation District (RW&SD), WWTP, NPDES Permit No. NM0023396		
Subject: Algal growth was observed on the disinfection basin weirs.		



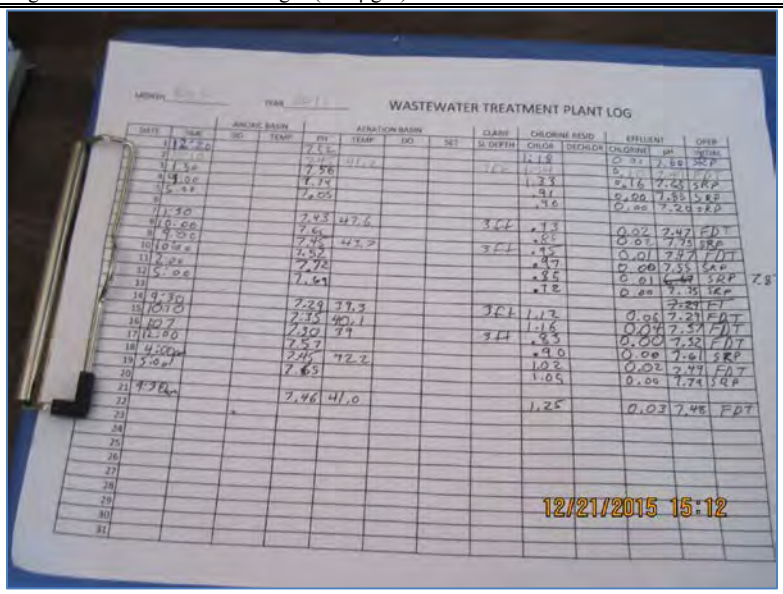
NMED/SWQB Official Photograph Log Photo # 5		
Photographer: Erin S. Trujillo	Date: 12/21/2015	Time: 1406 hours *(camera had not been updated for time change)*
City/County: Ramah / McKinley County		State: New Mexico
Location: Ramah Water and Sanitation District (RW&SD), WWTP, NPDES Permit No. NM0023396		
Subject: Flow measurement weir. Arrow points to effluent entering pipe that discharges to the outfall.		

NMED/SWQB Official Photograph Log Photo # 6		
Photographer: Erin S. Trujillo	Date: 12/21/2015	Time: 1407 hours *(camera had not been updated for time change)*
City/County: Ramah / McKinley County		State: New Mexico
Location: Ramah Water and Sanitation District (RW&SD), WWTP, NPDES Permit No. NM0023396		
Subject: East sludge drying bed.		

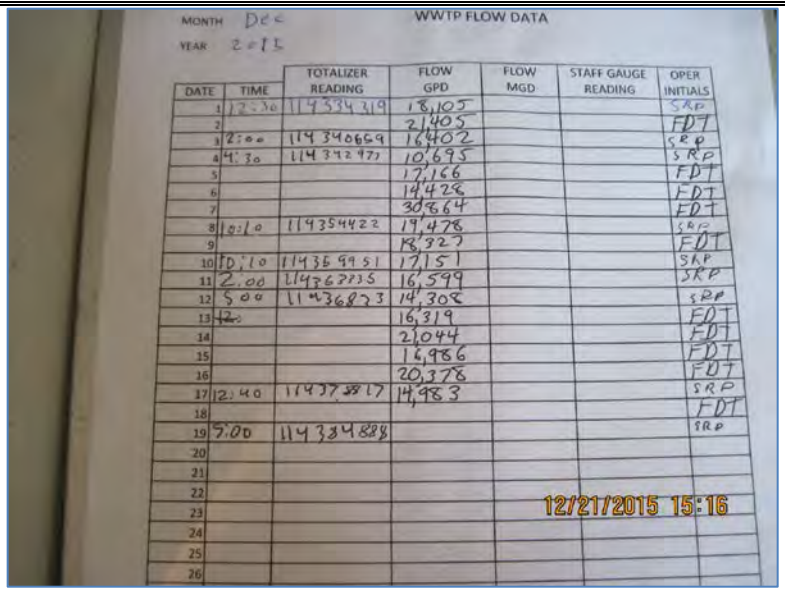
NMED/SWQB Official Photograph Log Photo # 7		
Photographer: Erin S. Trujillo	Date: 12/21/2015	Time: 1408 hours *(camera had not been updated for time change)*
City/County: Ramah / McKinley County		State: New Mexico
Location: Ramah Water and Sanitation District (RW&SD), WWTP, NPDES Permit No. NM0023396		
Subject: Stockpiled sludge stored in middle sludge drying bed.		

NMED/SWQB Official Photograph Log Photo # 8		
Photographer: Erin S. Trujillo	Date: 12/21/2015	Time: 1408 hours *(camera had not been updated for time change)*
City/County: Ramah / McKinley County		State: New Mexico
Location: Ramah Water and Sanitation District (RW&SD), WWTP, NPDES Permit No. NM0023396		
Subject: West sludge drying bed. Arrows point to some vegetation and wooden board to allow entrance with what appears to be sludge mixed with soil outside the bed.		

NMED/SWQB Official Photograph Log Photo # 9		
Photographer: Erin S. Trujillo	Date: 12/21/2015	Time: 1412 hours *(camera had not been updated for time change)*
City/County: Ramah / McKinley County		State: New Mexico
Location: Ramah Water and Sanitation District (RW&SD), WWTP, NPDES Permit No. NM0023396		
Subject: Example Wastewater Treatment Plant Log (December 2015). Log shows effluent chlorine and pH measurements. Permittee WWTP Operator stated that the units for TRC on the log were in mg/L. Log does not include monitoring methods or analytical times to confirm TRC and pH monitoring met holding times. Log indicates TRC results ranged between 0.00 and 0.16 mg/L (160 µg/L).		



NMED/SWQB Official Photograph Log Photo # 10		
Photographer: Erin S. Trujillo	Date: 12/21/2015	Time: 1416 hours *(camera had not been updated for time change)*
City/County: Ramah / McKinley County		State: New Mexico
Location: Ramah Water and Sanitation District (RW&SD), WWTP, NPDES Permit No. NM0023396		
Subject: Example WWTP Flow Data log (December 2015). Time of totalizer readings varied. Time of totalized flow (Flow GPD) measurement was not recorded.		



Appendix A – USEPA Compliance and Enforcement Staff and NMED Contacts

NPDES current enforcement contact for Ramah Water & Sanitation District:

Damon McElroy, USEPA R6 (CAED), 214-665-7159, mcelroy.damon@epa.gov

NPDES permit writer for Ramah Water & Sanitation District:

Isaac Chen, USEPA R6, NPDES Writer, 214-665-7364, chen.isaac@epa.gov

NPDES non-compliance reporting:

Gladys Gooden-Jackson
US Environmental Protection Agency
Region VI (6EN-WC)
Lead EPS, New Mexico State Coordinator
NPDES Compliance Monitoring Section
Water Enforcement Branch
Compliance Assurance and Enforcement Division
1445 Ross Avenue
Dallas, TX 75202-2733
(214) 665-7494 (Office)
(214) 665-2168 (FAX)
gooden-jackson.gladys@epa.gov

NPDES NetDMR:

Helen Nguyen
NetDMR & ICIS-NPDES Coordinator (6EN-WC)
NPDES Compliance Section
Water Enforcement Branch
Compliance Assurance and Enforcement Division
214-665-6458 (Office)
214-665-2168 (Fax)
nguyen.helen@epa.gov

Note: More information on USEPA electronic reporting using NetDMR is available at https://netdmr.epa.gov/netdmr/public/home.htm. If there are questions about NetDMR (e.g., activate and update current staff in the system for electronically submitting and certifying reports), the Permittee representatives can contact nguyen.helen@epa.gov. Also, USEPA announced monthly NetDMR webinar training sessions for NPDES Permittees starting January 27, 2016. News, announcements and training links are available at https://netdmr.zendesk.com.

NMED contact for copies of written reports/correspondence to USEPA, as required in the Standard Conditions of NPDES Permits:

Bruce J. Yurdin
Program Manager, Point Source Regulation Section
Surface Water Quality Bureau
New Mexico Environment Department
1190 South St. Francis Drive, Rm N2050
Santa Fe, NM 87502

Appendix B –Additional USEPA Guidance on Calculations

Loading

Effluent loadings are calculated using daily effluent flow and daily analytical data. Flow record keeping needs to include sufficient information for the daily flows on the day of sample collection. USEPA Region 6, NPDES Reporting Requirements Handbook, Revised August 25, 2004 states:

> **Reporting of Loadings**
>
> Some parameters in the permit are limited in terms of pounds per day (lbs/day). Although all of these parameters are measured initially in milligrams per liter (mg/L), conversion to lbs/day can be achieved by using the following formula. **Always be sure to use the flow measurement determined on the day when sampling was done.**
>
> **Flow on day of sampling (MGD) x concentration (mg/L) x 8.34 (lbs/gal) = Loading (lbs/day)**

Where: MGD = Million Gallons per Day

Flow Weighted Composite Samples

NPDES Storm Water Sampling Guidance Document, July 1992, EPA 833-B-92-001, Pages 75-81, http://www3.epa.gov/npdes/pubs/owm0093.pdf

Appendix C – Provided Copies of Paper DMR Records

Note: Documentation that the following DMRs were received and accepted by USEPA was not readily available during or provided following this CEI. Findings on the following copies of paper DMRs are in Section B of this Report.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) NM 0023396 PERMIT NUMBER
(17-19) 001 DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MONITORING PERIOD
FROM YEAR 2013 MO 01 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 2013 MO 01 DAY 31 (26-27) (28-29) (30-31)

☐ Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.0203	0.0247		NA	NA	NA		0	13/30	CN
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	1.4	1.4	lbs/D	NA	8.0	8.0	mg/L	0	1/30	GR
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	2.9	2.9	lbs/D	NA	17	17	mg/L	0	1/30	GR
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	10	ug/L	0	8/30	GR
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	1046.2	1046.2	CFU/100ml	1	1/30	GR
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.2	NA	7.3	S.U.	0	7/30	GR
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
~~TDS~~ 70296	SAMPLE MEASUREMENT		NA	lbs/D	NA	NA		mg/L			
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Robert Cain
Patrick Riley
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

R Cain
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321
FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) NM 00 23396 PERMIT NUMBER
(17-19) 001 DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	13	03	01	TO	13	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

☐ Check here if No Discharge

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.024	0026	MGD	NA	NA	NA		2	1/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	1.4	1.4	lbs/D	NA	8.1	8.1	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	2.8	2.8	lbs/D	NA	17	17	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA		ug/L			
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	60.9	60.9	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA			NA		S.U.			
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	152	NA	lbs/D	NA	NA	913	mg/L	0	1/3MO	Grab
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Robert Cain
TYPED OR PRINTED

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R. Cain
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER
DATE: YEAR | MO | DAY

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ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

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DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
NM 0023396	001

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	13	04	01	TO	13	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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NOTE: Read Instructions before completing this form

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	(4 Card Only) QUALITY OR CONCENTRATION MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.025	0.029	MGD	NA	NA	NA		0	10/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	7.4	7.4	lbs/D	NA	34	34	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	5.9	5.9	lbs/D	NA	27	27	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	N/A	ug/L	1	0/MO	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	2419	2419	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		N/A	NA	N/A	S.U.	1	0/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	N/A	NA	lbs/D	NA	NA	N/A	mg/L	0	N/A	N/A
	PERMIT REQUIREMENT	REPORT					Report			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Robert Cain

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

R Cain

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

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MONITORING PERIOD
FROM YEAR 13 MO 04 DAY 24 (20-21) (22-23) (24-25)
TO YEAR 13 MO 05 DAY 31 (26-27) (28-29) (30-31)

Form Approved.
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Flow 50050	SAMPLE MEASUREMENT	.024	.026	MGD	NA	NA	NA	N/A	1	13/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	1.6	1.6	lbs/D	NA	8.3	8.3	mg/L	0	1/mo	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	1.9	1.9	lbs/D	NA	10	10	mg/L	0	1/mo	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	19/MO	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	2419	2419	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.19	NA	7.55	S.U.	0	17/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	N/A	NA	lbs/D	NA	NA	N/A	mg/L	0	N/A	N/A
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Robert Cain
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER: NM 00 23396
(17-19) DISCHARGE NUMBER: 001

MONITORING PERIOD
FROM YEAR 13 MO 06 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 13 MO 06 DAY 30 (26-27) (28-29) (30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

☐ Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.024	0.025	MGD	NA	NA	NA		0	10/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	1.3	1.3	lbs/D	NA	6.5	6.5	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	2.6	2.6	lbs/D	NA	13	13	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	13/MO	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	~~27.5~~ 920	~~27.5~~ 920	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.21	NA	7.48	S.U.	0	16/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	171	NA	lbs/D	NA	NA	853	mg/L	0	1/3MO	Grab
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Robert Cain
TYPED OR PRINTED

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TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No 2040-0004
Approval expires 05-31-98

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
NM 0023396	001

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	13	07	01	TO	13	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

☐ Check here if No Discharge

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.025		MGD	NA	NA	NA		4	0/MO	Inst
	PERMIT REQUIREMENT	Report	Report							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	0.9	0.9	lbs/D	NA	4.1	4.1	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	1.5	1.5	lbs/D	NA	7.0	7.0	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	12/MO	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	27.5	27.5	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.20	NA	7.50	S.U.	0	9/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	N/A	NA	lbs/D	NA	NA	N/A	mg/L	0	N/A	N/A
	PERMIT REQUIREMENT	Report					Report			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16)

NM 0023396 — PERMIT NUMBER (17-19)

001 — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	2013	08	1	TO	2013	08	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	.027	.037	MGD	NA	NA	NA		0	1/mo	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/wk	Inst
BOD 00310	SAMPLE MEASUREMENT	1	1	lbs/D	NA	4.6	4.6	mg/L	0	1/mo	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	3.25	3.25	lbs/D	NA	15	15	mg/L	0	1/mo	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	16/mo	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	2419	2419	CFU/100ml	0	1/mo	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.31	NA	7.38	S.U.	0	15/mo	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	NA	NA	lbs/D	NA	NA	NA	mg/L	0	NA	NA
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE — AREA CODE — NUMBER

DATE — YEAR — MO — DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16)

NM 0023396 — PERMIT NUMBER

(17-19) 001 — DISCHARGE NUMBER

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	13	09	01	TO	13	09	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.025	0.026	MGD	NA	NA	NA		0	12/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	0.9	0.9	lbs/D	NA	4.2	4.2	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/MO	Grab
TSS 00530	SAMPLE MEASUREMENT	0.9	0.9	lbs/D	NA	4.0	4.0	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/MO	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	11/MO	Grab
	PERMIT REQUIREMENT						11			1/MO	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	12.1	12.1	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/MO	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.31	NA	7.39	S.U.	0	10/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/MO	Grab
TDS 70296	SAMPLE MEASUREMENT	178	NA	lbs/D	NA	NA	823	mg/L	0	1/3MO	Grab
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) NM 0023396 PERMIT NUMBER
(17-19) 001 DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR 13 MO 10 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 13 MO 10 DAY 31 (26-27) (28-29) (30-31)

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.021	0.024	MGD	NA	NA	NA		1	10/mo	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/wk	Inst
BOD 00310	SAMPLE MEASUREMENT	0.6	0.6	lbs/D	NA	3.0	3.0	mg/L	0	1/mo	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	3.6	3.6	lbs/D	NA	18	18	mg/L	0	1/mo	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	2	4/mo	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	25.9	25.9	CFU/100ml	0	1/mo	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.34	NA	7.76	S.U.	0	4/mo	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	N/A	NA	lbs/D	NA	NA	N/A	mg/L	0	1/3mo	Grab
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Robert Cain
TYPED OR PRINTED

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R. C.
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)
NM 0023396	001

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	13	11	01	TO	13	11	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

☐ Check here if No Discharge

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.022	0.022	MGD	NA	NA	NA		0	13/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	0.8	0.8	lbs/D	NA	4.4	4.4	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/MO	Grab
TSS 00530	SAMPLE MEASUREMENT	3.3	3.3	lbs/D	NA	18	18	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/MO	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	14/MO	Grab
	PERMIT REQUIREMENT						11			1/MO	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	36.4	36.4	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/MO	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.34	NA	7.43	S.U.	0	13/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/MO	Grab
TDS 70296	SAMPLE MEASUREMENT	N/A	NA	lbs/D	NA	NA	N/A	mg/L	0	1/3MO	Grab
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

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TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) NM 0023396 PERMIT NUMBER
(17-19) 001 DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR 13 MO 12 DAY 01 TO YEAR 13 MO 12 DAY 31
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.021	0.021	MGD	NA	NA	NA		0	13/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	1.1	1.1	lbs/D	NA	6.5	6.5	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	2 4.6	4.6	lbs/D	NA	26	26	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	19/MO	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	2419	2419	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.35	NA	7.40	S.U.	0	15/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	124.9	NA	lbs/D	NA	NA	713	mg/L	0	1/3MO	Grab
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Robert Cain
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE ____ NUMBER ____

DATE: YEAR ____ MO ____ DAY ____

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) NM 0023396 PERMIT NUMBER

(17-19) 001 DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	14	02	01	TO	14	02	28
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

☐ Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.022	0.025	MGD	NA	NA	NA	MGD	0	3/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	3.3	3.3	lbs/D	NA	18	18	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/MO	Grab
TSS 00530	SAMPLE MEASUREMENT	9.2	9.2	lbs/D	NA	50	50	mg/L	1	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/MO	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	14/MO	Grab
	PERMIT REQUIREMENT						11			1/MO	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	1986	1986	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/MO	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.33	NA	7.49	S.U.	0	14/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/MO	Grab
TDS 70296	SAMPLE MEASUREMENT	N/A	NA	lbs/D	NA	NA	N/A	mg/L	0	N/A	N/A
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 MOS.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Robert Cain	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)		AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) NM 0023396 PERMIT NUMBER

(17-19) 001 DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	14	03	01	TO	14	03	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.027	0.027	MGD	NA	NA	NA	MGD	4	4/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	2.2	2.2	lbs/D	NA	10	10	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/MO	Grab
TSS 00530	SAMPLE MEASUREMENT	2.8	2.8	lbs/D	NA	13	13	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/MO	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	12/MO	Grab
	PERMIT REQUIREMENT						11			1/MO	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	1732	1732	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/MO	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.34	NA	7.39	S.U.	0	13/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/MO	Grab
TDS 70296	SAMPLE MEASUREMENT	~~661~~ 143	NA	lbs/D	NA	NA	661	mg/L	0	1/3MO	Grab
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Robert Cairn	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)	R. C.				
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) NM 0023396 PERMIT NUMBER

(17-19) 001 DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	14	04	01	TO	14	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

☐ Check here if No Discharge

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.023	0.026	MGD	NA	NA	NA	MGD	1	10/mo	Inst
	PERMIT REQUIREMENT	Report	Report							2/wk	Inst
BOD 00310	SAMPLE MEASUREMENT	1.2	1.2	lbs/D	NA	6.6	6.6	mg/L	0	1/mo	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	0.8	0.8	lbs/D	NA	5.0	5.0	mg/L	0	1/mo	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	2/mo	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	517	517	CFU/100ml	0	1/mo	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.51	NA	7.60	S.U.	0	2/mo	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	N/A	NA	lbs/D	NA	NA	N/A	mg/L	0	N/A	N/A Grab
	PERMIT REQUIREMENT	Report					Report			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Robert Cain	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)	[signature]	AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) NM 00 23396 PERMIT NUMBER

(17-19) 001 DISCHARGE NUMBER

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	14	05	01	TO	14	05	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

☐ Check here if No Discharge

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.024	0.028	MGD	NA	NA	NA	MGD	0	8/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	3.0	3.0	lbs/D	NA	13	13	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	7.0	7.0	lbs/D	NA	30	30	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	17/MO	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	17.1	17.1	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.39	NA	7.70	S.U.	0	18/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	N/A	NA	lbs/D	NA	NA	N/A	mg/L	0	N/A	N/A
	PERMIT REQUIREMENT	REPORT					REPORT			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Robert Cain

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321
FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
NM 0023396	001

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	14	06	01	TO	14	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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OMB No. 2040-0004
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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (30-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.022	0.043	MGD	NA	NA	NA		3	7/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	2.25	2.25	lbs/D	NA	15	15	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/MO	Grab
TSS 00530	SAMPLE MEASUREMENT	5.4	5.4	lbs/D	NA	36	36	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/MO	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	12/MO	Grab
	PERMIT REQUIREMENT						11			1/MO	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	613	613	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/MO	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.54	NA	7.65	S.U.	0	11/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/MO	Grab
TDS 70296	SAMPLE MEASUREMENT	LW 72 108	NA	lbs/D	NA	NA	721	mg/L	0	1/3MO	Grab
	PERMIT REQUIREMENT	REPORT					Report			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Robert Cain	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)	R. Cain	AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER
NM 0023396	001

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	2014	07	01	TO	2014	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

☐ Check here if No Discharge

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.026	0.031	MGD	NA	NA	NA		3	2/mo	Inst.
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	0.807	0.807	lbs/D	NA	4.4	4.4	mg/L	0	1/mo	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	1.1	1.1	lbs/D	NA	6.0	6.0	mg/L	0	1/mo	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	60 MW 0	ug/L	0	16/mo	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	161	161	CFU/100ml	0	1/mo	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.51	NA	7.71	S.U.	0	16/mo	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	—	NA	lbs/D	NA	NA	—	mg/L	—	—	—
	PERMIT REQUIREMENT	REPORT					Report			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			TELEPHONE		DATE		
Robert Cain	I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY
TYPED OR PRINTED							

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)
(2-16) NM 00 23396 PERMIT NUMBER
(17-19) 001 DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR 14 MO 08 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 14 MO 08 DAY 31 (26-27) (28-29) (30-31)

Form Approved.
OMB No. 2040-0004
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NOTE: Read Instructions before completing this form

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (30-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.028	0.033	MGD	NA	NA	NA		0	17/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	0.58	0.58	lbs/D	NA	2.5	2.5	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	1.63	1.63	lbs/D	NA	7.0	7.0	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	12/MO	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	8.5	8.5	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.53	NA	7.68	S.U.	0	13/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	N/A	NA	lbs/D	NA	NA	N/A	mg/L	0	N/A	N/A
	PERMIT REQUIREMENT	REPORT					Report			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Robert Cain
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)
NAME Ramah Water & Sanitation District
ADDRESS P.O. Box 416
Ramah, NM 87321

FACILITY LOCATION McKinley County, NM

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

NM 0023396 (2-16) PERMIT NUMBER
001 (17-19) DISCHARGE NUMBER

MONITORING PERIOD
FROM YEAR 14 MO 09 DAY 01 (20-21) (22-23) (24-25)
TO YEAR 14 MO 09 DAY (26-27) (28-29) (30-31)

☐ Check here if No Discharge

NOTE: Read Instructions before completing this form

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
Flow 50050	SAMPLE MEASUREMENT	0.024	0.026	MGD	NA	NA	NA		0	14/MO	Inst
	PERMIT REQUIREMENT	REPORT	REPORT							2/WK	Inst
BOD 00310	SAMPLE MEASUREMENT	0.95	0.95	lbs/D	NA	5.2	5.2	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TSS 00530	SAMPLE MEASUREMENT	2.0	2.0	lbs/D	NA	11	11	mg/L	0	1/MO	Grab
	PERMIT REQUIREMENT	14.5	21.7			30	45			1/mo	Grab
TRC 50060	SAMPLE MEASUREMENT	NA	NA		NA	NA	0	ug/L	0	15/MO	Grab
	PERMIT REQUIREMENT						11			1/mo	Grab
E.coli Bacteria 51040	SAMPLE MEASUREMENT	NA	NA		NA	206	206	CFU/100ml	0	1/MO	Grab
	PERMIT REQUIREMENT					548	2507			1/mo	Grab
pH 00400	SAMPLE MEASUREMENT	NA	NA		7.73	NA	7.81	S.U.	0	6/MO	Grab
	PERMIT REQUIREMENT				6.0		9.0			1/mo	Grab
TDS 70296	SAMPLE MEASUREMENT	661 MW 12	NA	lbs/D	NA	NA	661	mg/L	0	1/3MO	Grab
	PERMIT REQUIREMENT	REPORT					Report			1/3 mos.	Grab

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Robert Cain
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM, OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE: AREA CODE | NUMBER

DATE: YEAR | MO | DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Appendix D – RW&SD AO Reply dated July 23, 2013 and

WET Biomonitoring Report dated January 30, 2013

Ramah Water & Sanitation District

P.O. Box 416 Ramah, NM 87321
TEL: 505-783-4018 FAX: 505-783-4822
Email: ramahwater@wildblue.net

July 23, 2013

Mr. James Eng
Water Enforcement Branch (6EN-WM)
EPA Region 6
10625 Fallstone Road
Houston, TX 77099

RE: Administrative Order, Docket Number: CWA-06-2013-1814
NPDES Permit Number: NM0023396

Dear Mr. Eng:

My name is Patrick A. Riley and I am the newly elected Chairman of the Board for Ramah Water & Sanitation District. I am writing in response to the Administrative Order, Docket Number: CWA-06-2013-1814 and NPDES Permit Number: NM0023396. Below are comments and updates per our current situation concerning your findings:

A whole effluent toxicity test was performed on April 11, 2013 a copy of the results are enclosed.

Our operation staff consists of a plant operator who just received his Level 2 Waste Discharge and also has a Level 1 Water Operator Certification. He will acquire his Level 3 Waste Discharge certification when eligible. In the meantime, he will add to his Water Certifications.

We have a backup operator who holds both Level 1 certifications in Water & Wastewater Discharge.

The treatment plant clarifier is free of floating sludge. The chlorine contact chamber was cleaned and is now functioning as designed. We are working now to clear the skimmers so that they will once again be operational. Next, we must replace the aerators to improve their performance. Then the sludge collection at the bottom of the clarifier will be brought into spec.

The flow meter will be calibrated as specified and records kept of regularly scheduled calibrations.

McKinley County through the Northwest Council of Governments as recently notified us of a planned PER concerning our entire waste water system. Pending the results of the PER, we anticipate acquiring a second full waste water plant so that our current plant will be used as an alternate and as a backup system.

Administratively we are creating operations logs, checklists, and files for all our procedures. I am astonished to find that this has never before been accomplished. A total reorganization is in order and in process.

Mr. Eng, this is a summary of our situation at this time. Our greatest concern is funding as we only have 133 customers in our district.

Sincerely,

Patrick Riley
Ramah Water & Sanitation District - Chairman

RAMAH WATER AND SANITATION DISTRICT
OUTFALL 001

48-Hour Acute Biomonitoring Report
Permit Number NPDES NM0023396

Daphnia pulex

January 30, 2013

Reviewed by: _____

Toni Nesbitt, QA/QC Officer
Huther & Associates, Inc.
1156 North Bonnie Brae
Denton, Texas 76201
(940) 387-1025, Fax: (940) 387-1036

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Huther and Associates, Inc.

environmental toxicologists, biologists, and consultants

48-HOUR ACUTE TOXICITY TEST REPORT

Client:..... Ramah Water and Sanitation District
NPDES No.:.....NM0023396
Sample: ..... Outfall 001

Project No.: 20596
Begin Date:.....January 30, 2013

Results: Pass *Daphnia pulex* survival at the critical low flow concentration (100% effluent).

SAMPLE COLLECTION

Composite effluent samples from the Ramah Water and Sanitation District were delivered by United Parcel Service courier to Huther and Associates on January 30 and January 31, 2013. The samples were manually collected and composited from Outfall 001 by facility personnel. One toxicity test was requested: a static renewal 48-hour definitive toxicity test using *Daphnia pulex* (*Methods for Measuring the Acute Toxicity of Effluents and Receiving Waters to Freshwater and Marine Organisms, Fifth Edition*, EPA-821-R-02-012).

The samples were analyzed for total residual chlorine (Standard Methods, 22nd Edition, 4500-Cl D) and contained <0.01 mg/L and <0.01 mg/L respectively. Effluent and laboratory water temperature, conductivity, hardness, alkalinity, pH, and dissolved oxygen data were collected and recorded.

TEST SETUP
Daphnia pulex

The 48-hour *D. pulex* toxicity test was initiated at 1605 hours, January 30, 2013. Five concentrations were prepared for testing (32%, 42%, 56%, 75%, and 100% effluent) utilizing distilled, deionized laboratory water reconstituted to match the hardness, alkalinity and pH of the receiving stream (Togeye Drain) as dilution water. The test was conducted using 25 mL distilled water rinsed plastic beakers containing 15 mL of test solution. Eight neonates less than 24 hours old were added to each of five replicate chambers per concentration. The test was renewed with fresh solutions on January 31, 2013. The test proceeded for 48-hours during which survival and water quality were recorded daily.

A control of five replicate chambers containing the appropriate number of organisms in synthetic laboratory water was conducted concurrently with the test. There was 100% survival in the control. The test ended at 1605 hours, February 1, 2013. Control data met all test acceptability criteria.

RESULTS
Daphnia pulex

There was 100% survival to *D. pulex* in all of the effluent concentrations tested. Therefore, statistical analyses were not required to determine a no effect concentration.

LOEC: Not Applicable
NOEC: 100% Effluent

SUMMARY

There were no statistically significant differences between the control and the critical low flow concentration (100% effluent) to *Daphnia pulex* survival. Based on biomonitoring requirements for Outfall 001 contained in Permit Number NPDES NM0023396 for the Ramah Water and Sanitation District, Outfall 001 passed for this testing period.

48-Hour *Daphnia pulex* Acute Definitive Toxicity Test

CLIENT	Ramah Water and Sanitation District	SAMPLE TYPE	24-hr Composite
NPDES #	NM0023396	DATE COLLECTED	01/29/13 01/30/13
LAB ID #	20596	DATE RECEIVED	01/30/13 01/31/13
TEST TYPE	Acute Static Renewal	BEGIN DATE/TIME	01/30/13 1605
TEST ORGANISM	*Daphnia pulex*	END DATE/TIME	02/01/13 1605
ORGANISM AGE	< 24-Hours	TEST TEMPERATURE (°C)	25 ± 1
ORGANISM SOURCE	In-house	PHOTO PERIOD	16-Hr Light 8-Hr Dark
RECEIVING WATER	Togeye Drain	LIGHT INTENSITY	50-100 Ft. Cndl.
DILUTION WATER	Laboratory Adjusted	TECHNICIAN	M. Horner

SURVIVAL SUMMARY

Effluent Conc.(%)	Number of live per Rep															$\bar{x}$ % Survival	CV%
	Start					24 Hour					48 Hour						
	A	B	C	D	E	A	B	C	D	E	A	B	C	D	E		
0%	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00
32%	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00
42%	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00
56%	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00
75%	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00
100%	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00

WET CHEMISTRY MEASUREMENTS

Date	Time	Temp	Samp. No.	pH (mg/L) of Solution						Analyst
				Con	32%	42%	56%	75%	100%	
01/30/13	Start	25.0	1	8.99	8.57	8.43	8.57	8.01	7.78	STC
01/31/13	24 Hr.	24.4	1	9.32	8.87	8.71	8.81	8.43	8.46	CTT
01/31/13	Renew	25.0	2	8.50	8.38	8.22	8.15	8.04	7.83	CTT
02/01/13	48 Hr.	24.4	2	8.27	8.31	8.32	8.34	8.36	8.38	CTT

Date	Time	Temp	Samp. No.	DO (mg/L) of Solution						Analyst
				Con	32%	42%	56%	75%	100%	
01/30/13	Start	25.0	1	7.64	8.15	7.95	7.85	7.82	7.99	STC
01/31/13	24 Hr.	24.4	1	7.83	7.80	7.88	7.89	7.94	7.92	CTT
01/31/13	Renew	25.0	2	8.61	8.65	8.64	8.61	8.70	7.91	CTT
02/01/13	48 Hr.	24.4	2	7.62	7.69	7.74	7.71	7.78	7.79	CTT

Date	Sample No.	pH[1]	DO[1]	Hardness mg/L CaCO3 [1]	Alkalinity mg/L CaCO3 [1]	Conduct. umhos/cm [1]	Resid.Cl2 mg/L[1]	Dechlor(mL) Na2S2O3 mg/L [1]	Analyst
01/30/13	1	7.78	7.99	320	264	829	<0.01	N/A	TN
01/31/13	2	7.83	7.91	316	256	835	<0.01	N/A	TN
01/30/13	Control	8.99	7.64	168	108	319	-	-	TN

[1] Measurements taken in 100% solution.

APPENDIX A:
RAW DATA

Huther and Associates, Inc.

environmental toxicologists, biologists, consultants

48-HOUR *DAPHNIA PULEX* SURVIVAL

CLIENT: Ramah

PROJECT#: 20596

	NUMBER ORGANISMS, 0 HRS					NUMBER ORGANISMS, 24 HRS					NUMBER ORGANISMS, 48 HRS						
CONC. (%)	A	B	C	D	E	A	B	C	D	E	A	B	C	D	E	MEAN	CV%
Con	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00
32	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00
42	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00
56	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00
75	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00
100	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	100.0	0.00
TECHNICIAN	MH					NL					NL						
DATE/TIME	1-30-13 1605					1-31-13 1605					2-1-13 1605						

1156 North Bonnie Brae Denton, Texas 76201 Ph: (940) 387-1026 Fax: (940) 387-1036

48- Hour Acute Toxicity Summary Form

Permittee: Romoh Inc. Organism: Pulex

Outfall: 001 20596

Lab ID No. : 20596

Begin Time/ Date 1-30-13 1605 End Date/Time 2-1-13 1605

Date	Time	Temp	Samp. No.	pH (mg/L) of Solution							Analyst
				CON	32	42	56	75	100		
1/30	Start	25.0	1	8.99	8.97	8.43	8.37	8.01	7.78		
1/31	24 Hr	24.4	1	8.32	8.37	8.38	8.41	8.43	8.46		
1/31	Renew	25.0	2	8.50	8.38	8.22	8.15	8.04	7.83		
2/1	48 Hr.	24.4	2	8.27	8.31	8.32	8.34	8.36	8.38		

Date	Time	Temp	Samp. No.	DO (mg/L) of Solution							Analyst
				CON	32	42	56	75	100		
1/30	Start	25.0	1	7.64	8.15	7.93	7.85	7.82	7.99		
1/31	24 Hr	24.4	1	7.83	7.81	7.88	7.82	7.94	7.92		
1/31	Renew	25.0	2	8.61	8.65	8.64	8.61	8.70	7.91		
2/1	48 Hr.	24.4	2	7.62	7.69	7.74	7.74	7.78	7.79		

Organism: _____

Begin Time/ Date _____ End Date/Time _____

Date	Time	Temp	Samp. No.	pH (mg/L) of Solution							Analyst
	Start										
	24 Hr										
	Renew										
	48 Hr.										

Date	Time	Temp	Samp. No.	DO (mg/L) of Solution							Analyst
	Start										
	24 Hr										
	Renew										
	48 Hr.										

Date	Samp. No.	PH	DO	Hardness mg/L CaCO3 [1]	Alkalinity mg/L CaCO3 [1]	Conduct umhos/cm [1]	Resid Cl2 mg/L [1]	Dechlor (mL) Na2S2O3 mg/L [1]	Analyst
1/30	1	7.78	7.99	320	264	829	<0.01	Na	TN
1/31	2	7.83	7.91	316	256	835	<0.01	Na	S
1/30	Con.	8.99	7.64	1108	108	319	—	—	

APPENDIX B:
REFERENCE TOXICANTS

Huther and Associates, Inc.

environmental toxicologists, biologists, consultants

ACUTE REFERENCE TOXICANT TEST RESULTS

SPECIES:	*Daphnia pulex*
CHEMICAL:	Sodium Chloride
DURATION:	48-Hours
TEST NUMBER:	1
TEST DATE:	01/03/13 - 01/05/13 1100 - 1100
STATISTICAL METHOD:	Spearman-Karber

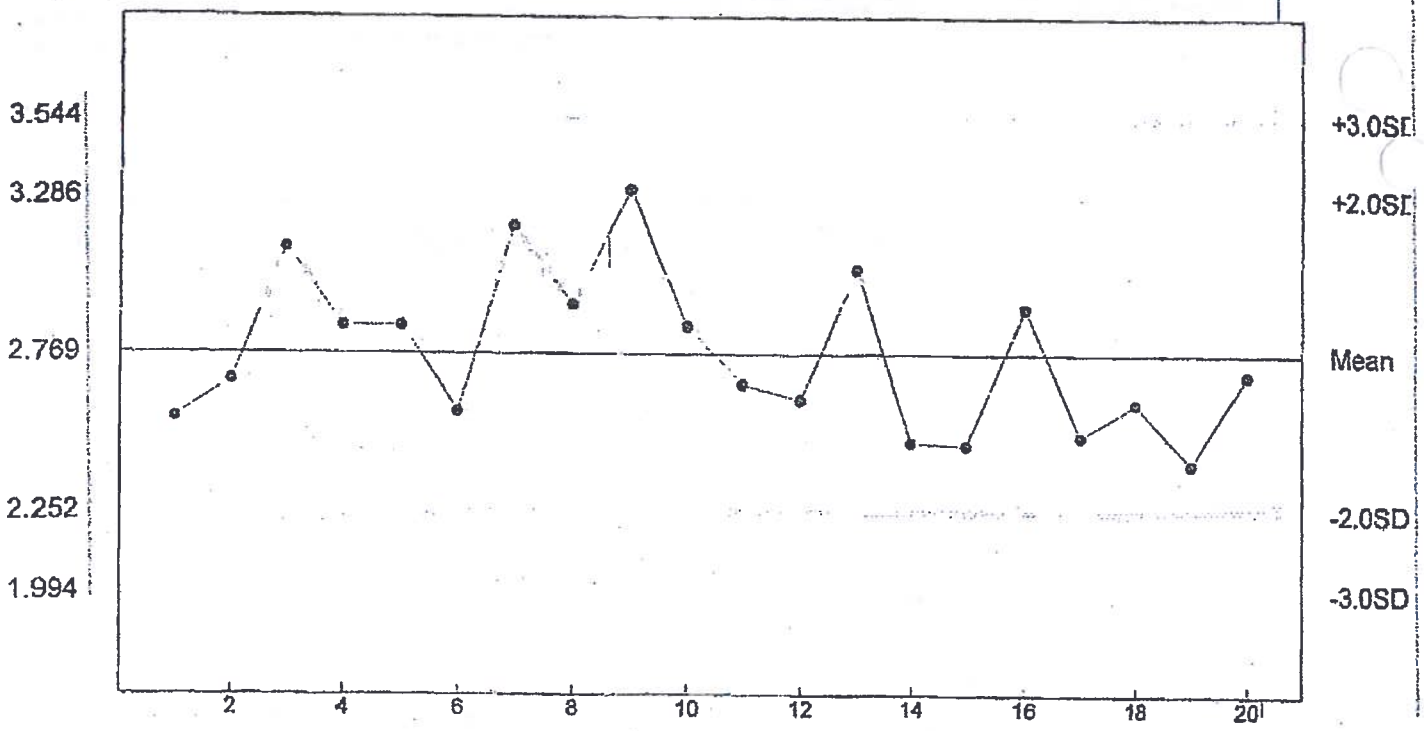
CONCENTRATION (g/L)	NUMBER EXPOSED	NUMBER DEAD
1.0	20	0
2.0	20	0
2.5	20	6
3.0	20	16
4.0	20	20
5.0	20	20

LC50	95% LOWER CONFIDENCE LIMITS	95% UPPER CONFIDENCE LIMITS
2.70 g/L	2.55 g/L	2.87 g/L

1156 Bonnie Brae Denton, Texas 76201 (940) 387-1025

Ref. Toxicant Sodium chloride g/L

Daphnia pulex LC50



n= 20 Mean= 2.769 SD= 0.258 CV= 9.33% Min= 2.410 Max= 3.310

APPENDIX C:
CHAIN OF CUSTODY

HUTHER & ASSOCIATES
1156 NORTH BONNIE BRAE STREET
DENTON, TX 76201
(940) 387-1025 • FAX (940) 387-1036

CHAIN OF CUSTODY RECORD

PROJECT # 20596 PROJECT NAME Ramah PERMIT# NPDES NM0023396

OUTFALL SAMPLES

24-Hr Flow Weighted Composite X Other ____

OUTFALL NUMBER	PERSON TAKING SAMPLE	START DATE/TIME	END DATE/TIME	# OF PORTIONS COMPOSITED	METHODS OF COLLECTION AND COMPOSITE: AUTO COLL. AUTO COMP.	MANUAL COLL. MANUAL COMP.	AUTO COLL. MANUAL COMP.	# OF CONTAINERS TO BE SHIPPED
001	C. WATTS	1/28/13 10:57am	1/29/13 9:42am	6		✓		1

RECEIVING WATER SAMPLES

SAMPLE IDENTIFICATION (FOR REC'NG) H_2O GRABS, GIVE NAME OF STREAM AND LOCATION	PERSON TAKING SAMPLE	DATE	TIME	# OF CONTAINERS TO BE SHIPPED

TYPE OF TEST 48 hr. Pulex
NAME OF RECEIVING WATER Togeye Drain
DILUTION WATER USED FOR THIS TEST Lab

RELINQUISHED BY: Carrie L Watts DATE: 1/29/13 TIME: 11:03 am RECEIVED BY AT THIS DATE/TIME ____
RELINQUISHED BY: ____ DATE: ____ TIME: ____ RECEIVED BY AT THIS DATE/TIME ____
RELINQUISHED BY: ____ DATE: ____ TIME: ____ RECEIVED BY AT THIS DATE/TIME ____
METHOD OF SHIPMENT: Greyhound ____ Pick Up ____ Client Delivered ____ Other UPS overnight
RECEIVED [signature] DATE: ?-13 TIME: 1025 SAMPLE TEMP. @ RECEIPT. 1

1ST PAGE - LAB COPY 2ND PAGE - FACILITY COPY

Huther and Associates, Inc.

environmental toxicologists, biologists, and consultants

RAMAH WATER AND SANITATION DISTRICT
NPDES PERMIT NUMBER NM0023396
BIOMONITORING REPORTING
TEST DATE: 01/30/13

I. *Daphnia pulex*	Response
1. If the NOEC for survival is less than the critical dilution, enter a "1"; otherwise, enter a "0" for Parameter TEM3D.	0
2. Report the NOEC value for survival, Parameter No. TOM3D.	100%
3. Report the highest (critical dilution or control) Coefficient of Variation, Parameter No. TQM3D.	0.00

1156 North Bonnie Brae Denton, Texas 76201 Ph: (940) 387-1025 Fax: (940) 387-1036